Recertification Report - CARF Accredited Organization

Provider Name			Provider Number	Begin Cert Date	End Cert Date
INDEPENDENT OPPORTUNITIES, LLC		121674100	10/30/2008	10/30/2009	
Organizational Practices	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date QIP Due
	Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	In-compliance	2 of 2 (100%) staff files reviewed had documentation of participant specific training, current CPR/1st Aid certification, current MANDT certification, results of background screenings, and met qualifications for the services they were providing.	No	
	Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	Recommendation (Focused)	The organization's form for documenting participant specific training did not clearly indicate that staff were being trained on behavior plans as applicable.	No	11/14/2008
	Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	Recommendation (Focused)	2 of 3 (66%) of staff interviewed was able to articulate functional participant specific knowledge.	No	11/14/2008
	Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	Suggestion	It is suggested that the organization develop a process for archiving old policies and procedures.	No	
	Emergency Drills (CARF 1.E.)	Recommendation (Focused)	2 of 2 locations had documentation of emergency drills completed. The documentation of emergency drills included a variety of drills, identified concerns when appropriate and follow-up on those concerns when appropriate. In residential habilitation the organization is not running drills on all shifts per provider documentation. There was no documentation that any drills were run during the hours of sleep.	No	11/14/2008

Recertification Report - CARF Accredited Organization

	rgency Procedures during sportation (CARF 1.E.)	Recommendation (Focused)	1 of 2 vehicles observed contained emergency procedures, the personal vehicle being used by a residential habilitation staff to transport a participant did not contain emergency procedures.	Yes	11/5/2008
Inter 1.E.)	rnal Inspections (CARF	In-compliance	2 of 2 locations reviewed had documentation of internal inspections with concerns identified when appropriate and follow-up to those concerns completed.	No	
Exter 1.E.)	rnal Inspections (CARF	Recommendation (Focused)	2 of 2 locations reviewed had documentation of current external inspections, with concerns identified when appropriate. 1 of 2 locations contained documentation of follow-up to those concerns.	No	11/14/2008
	ress made on prior DDD ey recommendations	In-compliance	With the exception of the issues addressed in this survey, the provider continues to make progress on recommendations from the previous survey.	No	
	ress made on prior CARF ey recommendations	In-compliance	With the exception of the issues addressed in this survey, the provider continues to make progress on recommendations from the previous CARF survey.	No	
(Wyd	dent reporting standards oming Medicaid rules oter 45, Section 30)	In-compliance	The provider's policy on incident reporting was reviewed and met applicable standards.	No	
(Wyd	dent reporting standards oming Medicaid rules oter 45, Section 30)	Recommendation (Systemic)	1 of 3 (33%)of staff interviewed were able to articulate functional knowledge of the Division's Notification of Incident Reporting process.	No	11/14/2008
	plaint and Grievance RF 1.D.)	In-compliance	The policy and procedure was reviewed and met applicable standards. The organization reported that there have been no formal grievances filed within the past year.	No	
(Wyo Chap	ts of Participants oming Medicaid rules, oters 45, Section 26, CARF ion 1)	In-compliance	The provider's policy on participant rights was reviewed and met applicable standards.	No	

Survey/Certification Staff Name: Yvonne Adekale, Program Integrity QMRP

Recertification Report - CARF Accredited Organization

	Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	Recommendation (Focused)	2 of 3 (66%) of staff interviewed were able to articulate functional knowledge of participant specific rights and restrictions.	No	11/14/2008
	Behavior Plans (Chapter 45, Section 29)	In-compliance	Two Positive Behavior Support Plans were reviewed, and all met the applicable requirements. The provider is encouraged to continue to work with the team and waiver specialist in the development of PBSPs.	No	
	Restraint standards (Chapter 45, Section28)	Recommendation (Focused)	The provider's policy on restraints was reviewed and met applicable standards. However; the provider did not have a process for tracking the usage of restraints.	No	11/14/2008
	Transportation Requirements (CARF 1.E.9)	Recommendation (Focused)	Two vehicles were reviewed across all service locations. The vehicle observed in residential habilitation at the time of inspection did not have current tags and had an unsecured fire extinguisher in the trunk.	Yes	11/5/2008
Participant Specific Reviews	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date QIP Due
	Implementation of Individual Plan of Care (Wyoming Medicaid rules Chapters 41, 42 and 43, Section 8)	In-compliance	Four files were reviewed and per the provider documentation the plans of care were being implemented appropriately.	No	
	Implementation of Individual Plan of Care (Wyoming Medicaid rules Chapters 41, 42 and 43, Section 8)	Suggestion	It is suggested for participant 4 that the agency ensure through staff supervision that the RHT being provided meets the definition of service provision, and if not that the organization work with the ISC to make necessary changes.	No	

Survey/Certification Staff Name: Yvonne Adekale, Program Integrity QMRP

Recertification Report - CARF Accredited Organization

		<u> </u>		
Implementation of Individual Plan of Care (Wyoming Medicaid rules Chapters 41, 42 and 43, Section 8)	Recommendation (Focused)	Staff interview revealed health and safety concerns for Participant 5 during competitive employment. These concerns were generally noted by her team through the IPC. It is recommended the provider work with participant 5's team to address the current health and safety concerns, including plans for the future.	No	11/14/2008
Releases of Information (CARF 2.B.)	Recommendation (Focused)	In 3 of the 4 files reviewed the releases were time- limited, specific to what information was being released, and to whom the information was being released.	No	11/14/2008
Emergency Information (CARF 2.B.)	Recommendation (Focused)	In 3 of the 4 participant files reviewed, all contained current and thorough emergency information. In participant 2's file the "Participant Fact Sheet" and the "Prescription Medication Consent Form" referred to an attached medication sheet which was not attached.	No	11/14/2008
Objectives and goal tracking (Wyoming Medicaid Rules Chapter 41-43)	In-compliance	Four participant files reviewed did consistently include documentation of tracking of progress made on objectives.	No	
Billing and Documentation (Wyoming Medicaid Rules Chtr. 45 Sect. 27)	Suggestion	Six months billing and documentation was reviewed on four participants. Participant 4's Residential Habilitation Documentation was reviewed and in the month of March 2008 the provider documented 28 units and billed 26 units. In addition, Participant 1's documentation was reviewed and the Division printout indicated that the provider documented 20 units but only billed for 16, even though the provider's billing statement shows that they billed for 20 units. The provider is suggested to review their current billing system to ensure what is documented is also billed for.		

Survey/Certification Staff Name: Yvonne Adekale, Program Integrity QMRP

Date: 10/15/2008

Recertification Report - CARF Accredited Organization

			9-11-1-11		
	Billing and Documentation (Wyoming Medicaid Rules Chtr. 45 Sect. 27)	Recommendation (Focused)	Participant 3's Day Habilitation documentation was reviewed and for June 13, 2008 the provider's scheduled did not include a time out; in addition, the provider was not using the approved Day Habilitation schedule to document service provision. This is a contested recommendation and the provider has until December 21, 2008 to submit a QIP.	No	11/14/2008
	Billing and Documentation (Wyoming Medicaid Rules Chtr. 45 Sect. 27)	Recommendation (Focused)	Participant 1's Day Habilitation documentation was reviewed and the documentation was consistently missing AM/PM's on time in and out of services throughout the six months of documentation that was reviewed. This is a contested recommendation and the provider has until December 21, 2008 to submit a QIP.	No	11/14/2008
Residential Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date QIP Due
	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	In-compliance	One residential site was visited, and showed evidence of maintaining a healthy and safe environment.	No	
	Organization meets CARF Standards on Community Housing (CARF Section 4.J)	In-compliance	Through observation of services, the provider is meeting applicable standards in this area.	No	
	The organization meets the standards in Chapter 45, section 23)	In-compliance	Through observation and review of provider documentation, the provider meets applicable standards in this area.	No	
Day Habilitiation, Employment Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date QIP Due
	The organization meets the standards for Community Integration (CARF 4.E)	In-compliance	The organization meets the standards, as evidenced by documentation review, guardian and participant interviews, and service observation.	No	
	Integration (CARF 4.E)		participant interviews, and service observation.		

Survey/Certification Staff Name: Yvonne Adekale, Program Integrity QMRP

Recertification Report - CARF Accredited Organization

	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	In-compliance	Through documentation review and service observation, the provider showed evidence of maintaining a healthy and safe environment.	No		
	Organization meets the standards for the service provided (CARF Standards and Medicaid rules)	In-compliance	The organization meets the standards at their service location, as evidenced by documentation review and service observation.	No		
Other Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date Due	QIP
	Organization maintains a healthy and safe environment (CARF 1.E.10 and WMR Chapter 45, Section 23)	Not Reviewed	While the organization provides other services, they were not able to be observed during the survey.	No		
	Organization meets the standards for the service provided (CARF Standards and WMR Chapter 41-45)	In-compliance	The provider meets applicable standards in this area, however, the provider should continue to work with provider staff to ensure they are meeting the definition of services being provided.	No		

Survey/Certification Staff Name: Yvonne Adekale, Program Integrity QMRP